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FACSIMILE COVER SHEETTotal No. of Page(s): 14 (including this sheet)

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By:

Joanne R. Petithory
Joanne R. Petithory

Attorney Docket No: 0212us310

In re application of:A.H. Pedersen, *et al.*

Application No.: 09/782,587

Filed: February 12, 2001

For: Factor VII or VIIa - Like
Molecules

Examiner: Teller, Roy R.

Art Unit: 1654

Preliminary Amendment and
Response to Restriction**TO BE MADE OF OFFICIAL RECORD****Enclosed herewith are:**

(1 page)	This Cover Sheet
(1 page)	Transmittal Form
(2 pages)	Petition for Extension of Time (2 months), plus 1 copy
(10 pages)	Preliminary Amendment /Response to Restriction

14 pages total

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09 / 782,587	
	Filing Date	Feb. 12, 2001	
	First Named Inventor	A.H. Pedersen	
	Group Art Unit	1654	
	Examiner Name	Roy R. Teller	
Total Number of Pages in This Submission	14	Attorney Docket Number	0212us310

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response (10 pp.) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): • fax cover sheet (1 p.) • copy of extension of time request (1 p.)
Authorization to Charge Deposit Account Please charge Deposit Account No. 60-0990 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Joanne R. Petithory Reg. No. 42,995 Maxygen, Inc.
Signature	<i>Joanne R. Petithory</i>
Date	June 19, 2003

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Signature	<i>Joanne R. Petithory</i>	Date	6/19/03